



<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number	09/868,276
		Filing Date	January 18, 2002
		First Named Inventor	Allen, Darin A.
		Art Unit	1624
		Examiner Name	S. B. Patel
Total Number of Pages in This Submission	25	Attorney Docket Number	015058-003210US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment After Allowance <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Return Postcard Issue Fee Transmittal (+ copy)
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual	Townsend and Townsend and Crew LLP William B. Kezer Reg. No. 37,369
Signature	
Date	5-17-04

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Jennifer K. Hardin		
Signature		Date	5/17/04



12/16/04  
→ Mr PS/TP  
M. enter the amendment  
PATENT  
Attorney Docket No.: 015058-003210US  
Client Ref. No.: 217 PCT  
TXX  
1624

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

ALLEN et al.

Application No.: 09/868,276

Filed: January 18, 2002

For: PROTEASE INHIBITORS

Customer No.: 20350

Confirmation No. 7233

Examiner: S. B. Patel

Technology Center/Art Unit: 1624

AMENDMENT AFTER ALLOWANCE  
UNDER 37 CFR § 1.312(a)

OK to enter RCR 12-16-04  
Mail Stop Issue Fee  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Notice of Allowance mailed February 19, 2004, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.